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BPV Case ID:		Completed by:	
Affix BPV Case Barcode Labe	el		
Tissue Bank ID:		Date Form Was Completed://(MM/DD/YYYY)	
History of cancer in patient	or blood relatives		
1. Does the participant have a history of prior malignancy?	Select One: O Yes (Enter details below) O No O Unknown		
Description of diagnosis. Enter each previous cancer diagnosis in a separate row. Add any additional diagnoses to the comments section on the last page of this form.		When diagnosis was received. Date if known or how long ago.	
			Date:/
			Date://
			Date:/



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BPV Case ID:	Tissue Bank ID:
Form Completed By:	Date Completed:// MM/DD/YYYY
2. Enter participant's blood relatives who have had a history of cancer in a separate row. Add any additional diagnoses to the comments section on the last page of this form.	Type of cancer
Aunt	
Brother	
☐ Daughter	
☐ Father	
☐ Mother	
Sister	
Son	
Uncle	
☐ Grandmother	
☐ Grandfather	
☐ Nephew	
☐ Niece	
Other (specify) Specify other blood relative:	



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Tom completed by:			MM/DD/YYYY
3. Does the participant have an immunosuppressive issue (HIV, organ transplant, steroid use, etc)?	Select One: O Yes (Check all that a O No O Unknown Check all that apply: HIV Organ transplant Chronic systemic s Other (specify) Specify other immuno	teroid use	
4. Has the participant received radiation therapy prior to surgery?	Select One: O Yes (Describe radiat O No O Unknown	tion therapy below)	
Describe each radiation therapy to a separate row. Add any additions section on the last page of this for	al radiation treatment		When radiation therapy was received. Date if known or how long ago.
			Date://
			Date://



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BPV Case ID:		Tissue Bank ID:	
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5. Has the participant received chemotherapy prior to surgery?	Select One: O Yes (Describe chemotherapy below) O No O Unknown		
Describe each chemotherapy the participant received prior to surgery in a separate row. Add any additional chemotherapy treatment to the comments section on the last page of this form.			When chemotherapy was received. Date if known or how long ago.
			Date://
			Date://



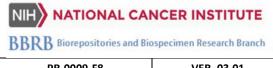
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BPV Case ID:		Tissue Bank ID:	
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6. Has the participant received immunotherapy prior to surgery?	Select One: O Yes (Describe immunotherapy below) O No O Unknown		
Describe each immunotherapy the participant received prior to surgery in a separate row. Add any additional immunotherapy treatment to the comments section on the last page of this form.			When immunotherapy was received. Date if known or how long ago.
			Date://
			Date:/



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BPV Case ID:		Tissue Bank ID:		
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	-			
7. Has the participant received hormonal therapy prior to surgery?	Select One: O Yes (Describe hormonal therapy below O No O Unknown		<i>(</i>)	
Describe each hormonal therapy to in a separate row. Add any addition comments section on the last page	onal hormonal therapy		When hormonal to Date if known or h	herapy was received. now long ago
			Date:/(MM/DI	D/YYYY) OR nal therapy was
			Time since hormo received (in years)	D/YYYY) OR nal therapy was
8. Did the participant have any ad cancer risk factors (as recorded in		O Yes	O No	O Unknown
Select all that apply: A diet that is high in red meats (beef, lamb, or liver) and processed meats (hot dogs and some luncheon meats) Obesity – weight >20% ideal body weight Type II diabetes Previous colorectal polyps Diagnosis of familial adenomatous polyposis in patient or family member Other risk factors (specify) Specify other risk factors:				



the results of supplemental

assays?

Biospecimen Pre-Analytical Variables (BPV) Colon Clinical Data Entry Form

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Form Completed By:	Data Come	oleted:	MM/DD/YYYY	
Infectious diseases				
9. Has the participant been diagnosed with hepatitis B?	O Yes	O No	O Unknown	
10. Has the participant been diagnosed with hepatitis C?	O Yes	O No	O Unknown	
11. Has the participant been diagnosed with HIV?	O Yes	O No	O Unknown	
Other (specify):				
12. Does the participant have a history of repeatedly reactive screening assays for HIV-1 or HIV-2 antibodies regardless of	O Yes	O No	O Unknown	



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Alcohol history				
13. Alcohol consumption	O Lifelong non-drin O Alcohol consump per day for women O Alcohol consump day for women O Consumed alcohol	O Lifelong non-drinker O Alcohol consumption equal to or less than 2 drinks per day for men and 1 drink or less per day for women O Alcohol consumption more than 2 drinks per day for men and more than 1 drink per		
14. Number of years participant has consume more than 2 drinks per day for men and more than 1 drink per day for women:	d			
Tobacco smoking history	1			
15. Tobacco smoking history:	O Current smoker: O Current reformed O Current reformed	Select One: O Lifelong non-smoker: less than 100 cigarettes smoked in lifetime O Current smoker: includes daily and non-daily smokers (Enter details below) O Current reformed smoker for more than 15 years (Enter details below) O Current reformed smoker for less than 15 years (Enter details below) O Smoking history not available		
Tobacco smoking details	: Complete if participan	t is a current or current refo	ormed smoker.	
Enter age at which the participant started smoking	Enter age at which the participant stopped smoking	On the days that the participant smoked, how many cigarettes did she/he usually smoke?	Number of pack years smoked. Pack years represent the lifetime tobacco exposure defined as number of cigarettes smoked per day times the number of years smoked divided by 20.	
16. Was the participant exposed to secondhand smoke?	O Yes (Select expos Exposure to s	=	nold during participant's childhood	



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O Exp	osure to secondhand	smoke history not availab	ble	
Clinical tumor stage group (AJCC 7	th edition)			
17. Clinical tumor stage group (AJCC 7th edition):	Select One: O Occult carcinoma O Stage 0 O Stage I O Stage IIA O Stage IIB O Stage IIC O Stage IIIA O Stage IIIA O Stage IIIA O Stage IIIB O Stage IIIB O Stage IIIC O Stage IVA O Stage IVB O Not available			
Record Karnofsky score or Eastern	Cancer Oncology Gro	un (FCOG) score		
18. Performance status scale recorded:	Select One: O Karnofsky score (Coscore section below) O Eastern Cancer One (Complete ECOG scool) O Not recorded	omplete Karnofsky cology Group score		
	O 60–70: symptoma 50% of the day	tic but fully ambulatory tic but in bed less than tic, in bed more than not bed ridden	Eastern Cancer Oncology Group (ECOG) score Select One: O 0: asymptomatic O 1: symptomatic but fully ambulatory O 2: symptomatic but in bed less than 50% of the day O 3: symptomatic, in bed more than 50% of the day, but not bed ridden O 4: bed ridden	

NIH NATIONAL CANCER INSTITUTE	
BBRB Biorepositories and Biospecimen Research Branch	

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19. Timing of score:	Select One: O Pre-operative O Pre-adjuvant then O Post adjuvant then O Unknown O Other (specify) Specify other timi	rapy			
20. Comments:					